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ABSTRACT

As part of a project to assess the effectiveness of the Technical Nursing Program at Florida Junior College (FJC) at Jacksonville in providing its graduates with job entry skills, a list of 38 technical nursing competencies was compiled, and an instrument was developed which requested three groups of jurors to rate these competencies according to importance. These juries included: 20 supervisors and head nurses from local hospitals, all 17 FJC technical nursing faculty members, and 20 recent FJC nursing program graduates. Because all competencies were rated at the "useful" level or above, this list of 38 competencies was used in developing a second questionnaire which was distributed to 89 supervisors and head nurses and 132 1973-74 program graduates. A total of 51 supervisors and head nurses and 60 graduates responded (57 and 45 percent, respectively). The supervisors did not rate the graduates as performing any competencies at the mastery level, but felt that 75 percent of the competencies were performed at an acceptable level. The graduates felt that their performances ranged from a high skill to an acceptable level. On the basis of these data, a model curriculum is proposed which incorporates the competencies into the program offerings. A literature review and the survey instruments are included. (NHM)

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A Study of the Entry-Level Functions of Technical Nurses in Health Care Facilities

LOIS DAVIS GIBSON

A MAJOR APPLIED RESEARCH PROJECT
PRESENTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR
THE DEGREE OF DOCTOR OF EDUCATION

NOVA UNIVERSITY

1975

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1. [illegible] 17

2. [illegible] 20

3. [illegible] 30

4. [illegible] 38

5. [illegible] 48

6. [illegible] 57

7. [illegible] 60

8. [illegible] 65

and allowed the time and opportunity to become increasingly effective in nursing practice.[1]

The technical nurse functions most effectively in those areas for which she has been prepared. The types of patient care responsibilities that can be included in the job need to be clearly understood by the potential employer. The beginning registered nurse practitioner, regardless of educational background, should not be employed in similar capacities or be expected to assume the same kinds of responsibilities. A clear distinction between the job requirements of the professional and the technical nurse is essential in order to capitalize on the potential of each type of practitioner.[2]

To prepare the technical nurse practitioner effectively, associate degree nursing educators must design a program focused on the broad functions and competencies which the technical nurse may be expected to have under appropriate circumstances and then select appropriate content to be

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[1] National League for Nursing, Department of Diploma and Associate Degree Programs. Characteristics of Educational Programs in Nursing Leading to an Associate Degree, 1960.

[2] Sandra Rasmussen, Editor. Technical Nursing, (Philadelphia: F. A. Davis Company 1972), p. 90.

taught in relation to these functions and competencies.

Nursing educators have come to realize that there is high correlation between the quality of the nursing program and the success or failure of the graduate to function effectively as a beginning practitioner. It is the task of the associate degree nursing faculty to describe the technical nursing program and the practice for which its graduates are prepared.

Accountability to the community's health services and responsiveness to the public s nursing needs can only be satisfied by appropriate and effective curriculum experiences in the technical nursing program. Therefore, a systematic determination of the required entry-level functions of technical nurses and a thorough assessment of the extent to which technical nursing graduates are performing these functions are prerequisites to the design of a curriculum to meet the tests of accountability and responsiveness.

Statement of the Problem

The purpose of this major research project was to assess the effectiveness of the Technical Nursing Program at Florida Junior College at Jacksonville in providing its graduates

with job-entry skills.

It was the intent of the writer of this study to: (1) identify entry-level technical nursing functions; (2) determine the extent to which the graduates of the technical nursing program were performing these functions; and (3) establish a model curriculum at Florida Junior College at Jacksonville for the associate degree in technical nursing.

Justification for the Study

The beginning practitioner in nursing has been receiving increasing attention from members of the health care delivery system. However, much of this attention is not positive, especially since the emergence of technical nursing programs. Associate degree nurses have been accused of inadequate or inappropriate training for functioning in health care facilities.

Associate degree programs were intended, according to Montag,[3] to educate nurses to perform technical functions that lay between the simple or assisting functions and the

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[3] Mildred Montag, The Education of Nursing Technicians, (New York: John Wiley and Sons, Inc., 1971), p. 7.

complex or professional functions. More specifically, technical nurses were to assist in the planning of nursing care for patients, to give general nursing care with supervision, and to assist in evaluating the nursing care given. The associate degree nursing program was developed to prepare nurses more effectively and more economically for the functions commonly associated with the registered nurse. The success of the program in preparing its graduates for satisfactory performance has been clearly demonstrated.[4] But the ultimate aim of the program will be achieved only through the proper utilization of its graduates.

A major problem needing critical attention is whether nursing service administrators utilize the associate degree graduates at the level for which they have been prepared. Perhaps some reasons for this problem are the different perspectives as to how the technical nursing graduates should function and how they are being prepared to function. Many nursing educators in associate degree programs contend that

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[4] Tschudin, Mary S. "Educational Preparation Needed By The Nurse in the Future." Nursing Outlook, 12:32-33, April, 1964.

the role of the technical nurse should not be expanded but possibly extended to include more specialized functions.

Delimitations

In executing the study of the effectiveness of the technical nursing program in providing its graduates with job entry skills, certain limitations were deliberated.

1. The nurse population was confined to associate degree graduates in direct care, either as team members or staff nurse, of the hospitalized patients. About ninety per cent of the graduates of Florida Junior College's nursing program seek employment in hospitals.

2. The behavioral competencies defined for the data collecting instrument were identified from the literature and opinions of local nursing educators, directors of nursing services, and registered nurses.

3. The categories of behavior competencies utilized in determining technical nurses' functioning of job entry skills should not be interpreted as representing a complete list of categories and required skill performances.

4. The model curriculum designed in this research project is confined to required nursing courses with guidelines for placement of behavioral competencies.

5. The total time period of the study was nine months.

Definition of Terms

Nurse Practitioner — One who complied with the requirements for becoming a

Nurse Practitioner (continued)	registered nurse and is currently engaged in the practice of nursing.
Technical Nurse	One who carried out nursing and other therapeutic measures with a high degree of skill that was essential in direct patient care.
Entry-Level Functions	Performance of technical skills of the beginning nursing graduate in the general hospital setting.
Health Care Facilities	Hospitals providing health care to patients with medical or surgical conditions.
Behavioral Competencies	Specific nursing techniqu e essential in the medical or surgical treatment of patients. These competencies were performed independently by the nurse practitioner.
Expected Role	Expected role was the operationally defined list of behaviors describing the activities of the technical nurse.
Head Nurse/Supervisor	Registered nurse who managed and was responsible for total activities, nursing and non-nursing of a particular nursing unit.

The Hypotheses

1. If entry-level functions are clearly identified

by all functionaries in the medical delivery services sample, then the role of the technical nurse will be identified. This will facilitate communication between the basic educators and the health care delivery system personnel.

2. If the performance of the graduates of the associate degree technical nursing program is thoroughly assessed and the results reveal that a discrepancy exists between the performance of the behavioral competencies by technical nursing graduates, and the perception of the supervisors and the head nurses, this will serve as a basis for the revision of the curriculum of the program.

3. If a model curriculum is established, based heavily upon one and two above, the program should provide portability and responsiveness to the community which employs 90 to 95% of the program's graduates. Such a model should be applicable in other Florida programs.

Organization of the Study

In Chapter II the writer discusses the theoretical framework in which the study was done. An overview of the education of associate degree nursing graduates and the

Supervisors and the behavioral issues or characterized by the interventions was presented. In Chapter III the research design and procedures in determining the validity of the behavioral components of the behaviorally prepared scale by the researcher began after obtaining the permission of the survey instrument, the selection of the sample and the collection of data, and the plan of data analysis. Chapter IV reports the findings from the data collected from respondents. Chapter V discusses the conclusions, implications and recommendations. Chapter VI presents the proposed model for intervention strategy for the supervisors in Nigerian industrial security programs in Kwanda Kwara Heritage in Southwestern. Chapter VII presents the summary and conclusions drawn from the data and lists some recommendations for security officers and training services.

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In the early 1950's, millions of Americans were enjoying rapidly and increasingly successful lives. The pace of the anti-progress action has accelerated. Millions of persons, despite economic and personal obstacles [illegible] a need for more education [illegible] than previous generations had known.[1]

Because the growth of the community college movement differs [illegible] in the proportion of its [illegible] and territory. Even in typical [illegible] the community college is growth in educational opportunity. There is [illegible] [illegible] [illegible]

[illegible]

[illegible]

[illegible][1]

[illegible]

[illegible][2]

[illegible]

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[1] [illegible] : ص ٢٦

[2] [illegible] [illegible] : ص ٣٩

as a criteria in recruiting young people who might not otherwise be interested. The importance of the functions and the dignity of the technical nurse practitioner should not be underestimated.

Although studies have shown that associate degree nursing graduates are successful in obtaining licensure and performing satisfactorily, growing problems in the present health care delivery system raise questions in regard to how the technical nurse is currently functioning. Are they continuing to be accepted, and are they functioning as philosophically intended by the educational programs preparing them?

Looking at many actual practices it is apparent that the employment of the technical nurse graduate and subsequent integration of their abilities in the nursing care delivery system depend on the philosophy and leadership style of the nursing administrators in the given situation and the general attitude of acceptance by the staff where the graduate seeks employment.[12]

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[12] Rose Channing, "Future Directions for the Associate Degree Nurse," Nursing Outlook, (February 1973), p. 110.

Nursing Education and Nursing Service

A major concern, that of a seeming dichotomy between what technical nurses are taught and what they are doing as beginning practitioners of nursing, has emerged as the continued exploration of preparation needs has proceeded. This contrast not only reflects problems in preparing the graduate nurse but also may pose problems concerning future employment and utilization of services.

Martin contends that there is a need to change the practice field but not the associate degree nursing graduate. The major focus of any educational program must be on the principles and theory that will enable continuous inservice education.[13]

Data exists which shows what appears to be a general lack of communication between persons preparing the associate graduate and the individuals utilizing the services of the new graduate. It can be further noted that the work roles in reality do not apparently comply with the philosophy and curriculum as it is currently designed to prepare the

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[13] Almeda Martin, "Associate Degree Nursing...Are Changes Needed in the Practice Field for the New Graduate?" Journal of Nursing Education, (August 1969), p. 7.

technical nursing graduate.[14]

If nursing is to meet society's needs, there should be further exploration and identification of the functions of the technical nurse, now and in the future. The profession of nursing needs to develop clearly defined guidelines by which it can determine what is and is not a nursing function - nursing needs to take steps to reduce the discrepancy between what is currently being taught in schools of nursing and what is being practiced in the hospitals.[15]

Work Roles of the Technical Nurse

The report of the National Commission for the Study of Nursing and Nursing Education emphasized that a profession has the right and responsibility to assess its own roles and that nursing roles must be clarified and career patterns reorganized for nursing practice so that nurses can practice at their highest capability. The role of the nurse is apparently defined by what needs to be done rather than the

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[14] Michael H. Miller, "Work Roles for the Associate Degree Graduate," American Journal of Nursing, (March 1974), p. 468.

[15] Neil W. Rheiner, "The Role and Status of Nursing as Perceived by Nurses," (Unpublished Doctor's Dissertation, University of Nebraska, 1970), p. 70.

preparation of the practitioner. Frequently, nurses perform challenging tasks for which they are not prepared as well as other functions which do not afford them the opportunity to utilize their potentials to the fullest. It is apparent that a critical study should be made of the patterns of assignments.[16]

It can be observed from a review of the literature that the technical nurse is educated to do basic bedside nursing and to develop a high degree of expertise in the technical areas. Yet in the delivery system, the nurse technician finds himself all too frequently placed in a position of responsibility and leadership for which he was not prepared. Thus, it becomes necessary to live with the criticisms vented on the associate degree nursing program by nursing service administration and, in some cases, discriminatory practices.[17]

Graduates of both the baccalaureate and associate degree

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[16] The Report of the National Commission for the Study of Nursing and Nursing Education, 1970.

[17] Mary Kohnke, "Do Nursing Educators Practice What is Preached?" American Journal of Nursing, (September 1973), p. 1573.

programs must have clear images of who they are, how they fit together, and where they fit into the delivery system. Miller discovered that in the work roles of the associate degree graduate, the technical nurses are functioning, at least part of the time, in ways for which they are not prepared. A review of the curriculum does not indicate preparation for supervisory positions; however, they are utilized as such by nursing service.[18]

Christman concluded in an examination of the clinical performance of baccalaureate graduates that a study needs to be conducted to identify the difference in the level of performance and quality of care provided by nurses at all educational levels. Such a study would help nursing educators in curriculum development and nursing service administrators in the development of methods for utilization of their nurses to the best advantage in increasing the quality of patient care.[19]

The new graduate often assumes the role of the head

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[18] Miller, Op. Cit., p. 468.

[19] Norma J. Christman, "Clinical Performance of Baccalaureate Graduates," Nursing Outlook, (January 1971), p. 55.

nurse who is essentially responsible for managerial and administrative functions. An investigation of the role theory concept and practice was undertaken. The following recommendation was made:

> The basic educational preparation a nurse receives prepares her to nurse, not to manage a ward. The probability that head nurses would continue to be unable to qualify for and fulfill satisfactorily these expectations is great.
>
> Therefore, it is recommended that -
>
> 1. head nurse positions be eliminated
> 2. managerial and administrative functions necessarily required for efficient, effective operation be carried out by managers and administrators educationally prepared to carry out these functions.[30]

The Preparation and Performance of the Technical Nurse

The extent to which the community college faculty can help students make realistic decisions and prepare for appropriate and satisfying careers is a measure of the

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[30] Frances Connolly, "The Application of Role Theory Concepts to a Historical Examination of the Head Nurse Role," (Unpublished Doctor's Dissertation, Boston University 1971), p. 184.

institution's success.

The success of the student is a new measure of excellence needed in our complex and challenging society. While excellence in certain academic programs may be judged on the basis of student success upon transfer to senior institutions, excellence in vocational-technical training is judged on occupational efficiency.[21]

Education in the community college setting must be aware of the interrelationships between the college and the community. The faculty and the community are then likely to be in tune with what the student needs to learn and how his particular abilities fit into opportunities available to him.[22]

Education that is relevant to our time must be sought and the highest quality of learning achieved. Innovation and improvement are essential. Changes in institutions are taking place but change is not an end in itself. Increased and improved student learning and performance must

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[21] William G. Ellena and Max G. Baldwin, Perspectives in the Community Junior College, Selected Readings (New York, Appleton-Century-Crofts, 1971), p. 517.

[22] Ibid., p. 518.

[illegible] [illegible] [illegible] [

[illegible], and individuals persons with of necessity change to programs the graduates to participants to intended benefit were. The associate degree graduate noted participation leadership and proceed by a decreased number of positions teachers would search to a planning been supply of planning supplementation persons needs to the benefit were Baccalaureate.

As a second study [illegible] the graduates of associate degree programs, the least success noted the performance of the be planning career preparedness. The findings indicated that seventy per cent of the technical nurses were employed as performing the same or better than graduates of the baccalaureate or degree nursing program.

The technical nurses themselves experienced satisfaction with their basic preparation and the quality of teaching to which they were previously exposed. The amount of classroom experience was noted as a factor lacked as a general weakness in the basic curriculum. The graduates personally interested a lack of preparation by other graduates as a group of achievements. They had an decent confidence on the nursing program.[20]

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[20] [illegible] Services. Evaluation of Graduates of Associate Degree Nursing Programs. National Educational Development Research Service, Incidental Monograph [illegible] pp. 41-

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FIGURE 1

MANAGEMENT MODEL

IDENTIFY NURSING FUNCTIONS
1.0 PERFORM FUNCTION NEEDS ASSESSMENT
2.0 DECIDE FUNCTION CATEGORIES
3.0 STATE THE FUNCTIONS
4.0 RATE THE FUNCTIONS
5.0 EVALUATE AND REVISE FUNCTION STATEMENTS

FIGURE 1. A Management Process Model for the Identification, Monitoring and evaluation of Technical Nurses Entry Level Functions with Provision for Continuous Feedback

design may be explained, and it serves as a graphic guide for others wishing to develop nursing program curriculums appropriate to the needs of their clientele.

Performing Functions Needs Assessment 1.0

The identification of the status of the technical nurse functioning in a health care delivery system in northeast Florida and the determination of the expected functions of such a nurse served as the essential beginning point. The conduct of the needs assessment required answers to these questions: What does the literature say about other studies and activities in the area of identifying technical nursing competencies? Who can best conduct such a job analysis? Who can best identify critical functions? The research design sought to elicit answers to these questions.

Though the primary objective of this study was to develop a program for a specific school primarily serving a limited geographical area, academic soundness required that local perceptions be reflected against a thorough literature search taking into account technical nursing programs reported all over the nation. When such a literature review is conducted, and when the findings are

appropriately incorporated into the local program, graduates will be able to function in health care delivery centers regardless of geographical locality. See Chapter II for a detailed treatment of the literature.

Nursing supervisors, head nurses, and the Florida Junior College Technical Nursing Program faculty were seen as the publics who could contribute most to the conduct of a job analysis and to the identification of critical functions.

Consequently, the design for identifying the competencies of technical nurses was defining the tasks to be done and making an analysis of each task to determine the necessary competencies. Beginning with the broad categories of tasks, the judgement of professionals, practitioners, and theoreticians listed above, competencies were identified under each category. Validation of these competency statements was done by the same jury types. While these efforts were all done subjectively, they had the advantage of using combined judgements which lent a reasonable degree of creditability to the results.

Deciding Function Categories 2.0

A critical decision had to be made on the categorization of the functions. The decision was critical in that the philosophy of the nursing programs demand certain captions. The literature cites examples of certain categories.

Sandra Rasmussen[28] defines a technical nurse as a registered nurse with an associate degree in nursing, licensed for the practice of nursing and carrying out nursing and therapeutic measures with a high degree of skill, and utilizing principles from an expanding body of science. The technical nurse performs functions with patients who are under the supervision of a physician and/or professional nurse. She further identifies the minimum expectations of a registered nurse as categorized into three major captions:

1. personal characteristics and attitudes
2. knowledge
3. professional skills and competencies

---

28 Rasmussen, Op. Cit., p. 17.

Norma J. Christman reports seven components of nursing care as defined by Krueter:[29]

1. Ministering to the basic human needs
2. Administering medicines, tests, and treatments
3. Observing the patient's response and adaptation
4. Teaching self-care, or counseling on health
5. Supervising or guiding the patient's rehabilitative activities in modifications of daily living
6. Planning with the patient for self-care, which is an outgrowth of managing the care for him - determining and timing the course of action and controlling the manner of its performance
7. Communicating with the patient throughout all of these - to develop a sense of trust, a feeling of significance and ultimately of self-realization.

The function categories used in this study were the four major categories in the Florida Junior College technical nursing program.

1. Nursing Process I - Fundamentals of Nursing
2. Nursing Process II - Introduction to Medical-Surgical Nursing

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[29] Christman, Op. Cit., p. 55.

3. Nursing Process III - Maternal Care and Psychiatric-Mental Health Nursing

4. Nursing Process IV - Care of the Adult and Child Patient

In the design of the instruments for this study, it was decided to refrain from stating the function categories because arguments might ensue over the appropriateness of the competency placement to the detriment of singular attention to the competency itself.

Rating The Functions 3.0

Statement of the competencies required: (1) a thorough review of the job analysis; (2) analyses of critical incidents; and (3) a studious review of the literature - all performed in the needs assessment task. The competencies required of a technical nurse in health care facilities at the job entry-level were the primary concern here. Therefore, the many competencies found in the literature and the scores of competencies identified by the juries had to be reviewed by the writer in view of the specific requirements defined by the study's objective and the practical communication problems that a great number of stated

competencies would engender.

Rating the Practices 4-5

After a total of thirty-eight competencies were stated, an instrument was developed listing these "minimum" competencies of beginning technical nurses for the juries to rate. See Appendix A.

Twenty supervisors and head nurses in the hospitals where ninety to ninety-five percent of Florida Junior College's technical nursing graduates are employed were selected as one jury. The instruments were delivered to them at their respective hospitals. A self-addressed envelope was provided for them to return the questionnaires. Table 1 indicates the ratings of the behavior competencies.

All seventeen faculty members of the Florida Junior College's technical nursing programs were selected as another jury. Questionnaires were handed to them at their desks. See Table 2 for their responses.

A group of twenty Florida Junior College technical nursing graduates who were products of the nursing program under the same curriculum structure was selected as a jury. They were those graduates who completed their programs during the period, August, 1971, through April, 1972.

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[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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(1)	[illegible]	(2)	(3)	(4)	(5)	(1)-(5)
(2)	[illegible]	(2)	(3)	(4)	(5)	(1)-(5)
(3)	[illegible]		(3)	(4)	(5)	(1)-(5)
(4)	[illegible]		(3)	(4)	(5)	(1)-(5)
(5)	[illegible]		(3)	(4)	(5)	(1)-(5)
(6)	[illegible]		(3)	(4)	(5)	(1)-(5)
(7)	[illegible]		(3)	(4)	(5)	(1)-(5)
(8)	[illegible]		(3)	(4)	(5)	(1)-(5)

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(1) [illegible]
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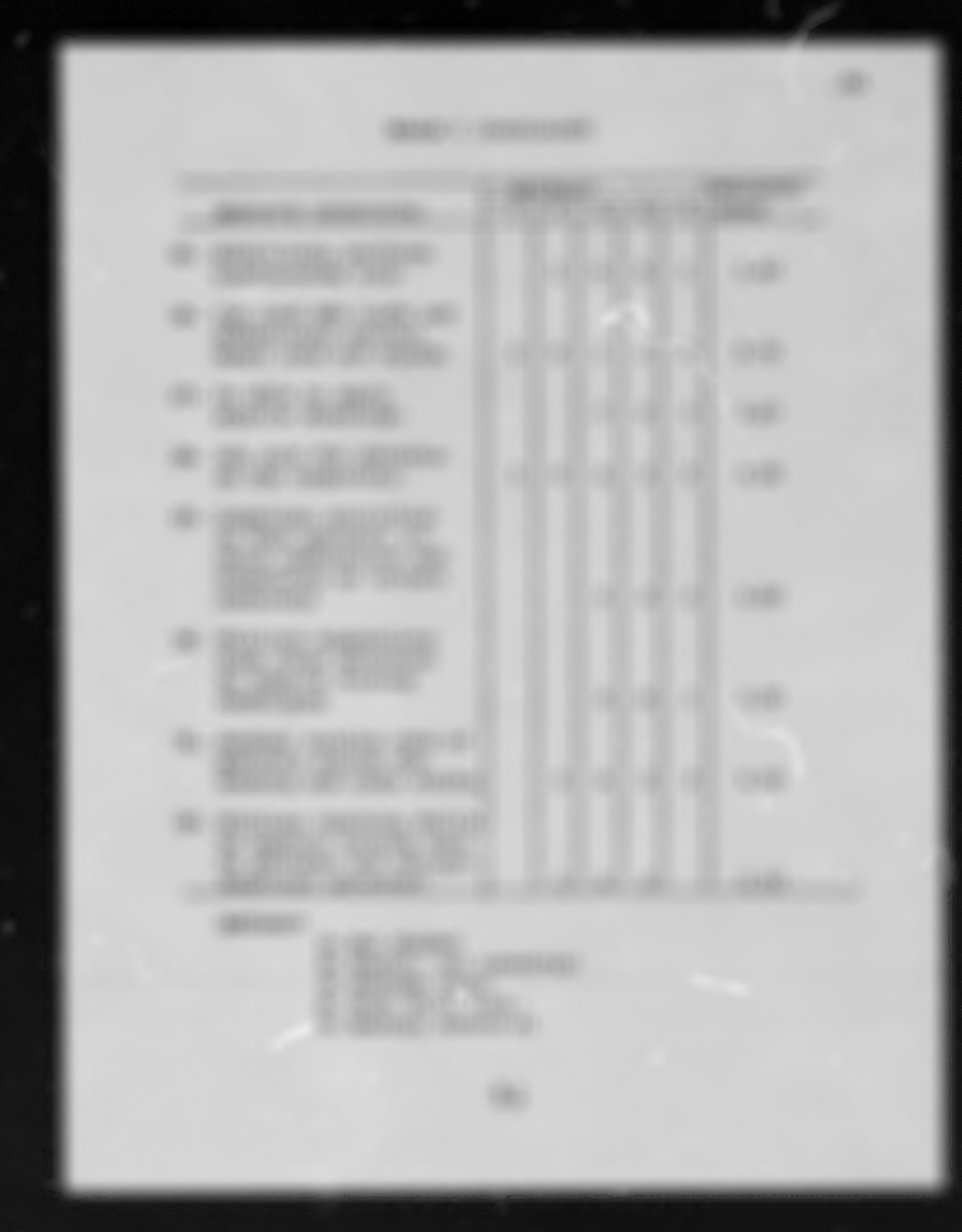

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(b)	[illegible]					(1.0)
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(a) [illegible]
(b) [illegible]
(c) [illegible]
(d) [illegible]
(e) [illegible]

TABLE 2 (Continued)

RESPONSE CATEGORIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
6. Recognizes signs and symptoms of major illnesses and can relate them to causes with appropriate nursing actions			7	4	3	3.71
7. Can effectively organize and manage a patient care unit with attention to the establishment of priorities in patient care			10	1	1	3.25
8. Adjusts approach in general conversation and in specialized explanations to the kind and type of patient			7	5	2	3.64
9. Plans care of the patient from the standpoint of the patient as an individual person			5	5	4	3.93
10. Can meet the physical hygienic needs of patients			3	4	7	4.29
11. Provides aid in turning, positioning and moving patients			4	3	7	4.21

RATINGS*

1= Not Needed
2= Useful, not essential
3= Average level
4= High skill level
5= Mastery essential

TABLE 2 (Continued)

RESPONSE CATEGORIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
12. Prepares patients for meals and feed patients as indicated			6	2	5	3.92
13. Maintains safety measures through provisions for isolation, surgical asepsis, elimination of physical hazards, and environmental control			3	5	6	4.21
14. Identifies danger signals and manifestation of illness			1	9	3	3.86
15. Administers oral and topical medications			3	3	8	4.36
16. Administers intramuscular and subcutaneous medications			3	3	8	4.36
17. Administers intravenous medications and fluids	1	5	5	2	1	2.79
18. Meets emergency situations: cardiac massage, controls hemorrhage, and utilizes measures to lessen shock			6	5	2	3.69

RATINGS*

1= Not Needed
2= Useful, not essential
3= Average level
4= High skill level
5= Mastery essential

TABLE 2 (Continued)

RESPONSE CATEGORIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
19. Can effectively utilize mechanical devices: circoelectric bed, traction, restraints, hoyer lift		2	6	4	2	3.43
20. Performs irrigations safely: naso-oral, colostomy, vaginal, and bladder			7	4	3	3.71
21. Can operate special equipment for patient care such as oxygen equipment and suction apparatus			6	4	4	3.86
22. Knows procedural skills which will enable the nurse to perform common diagnostic tests: test urine, collect sputum, feces and smears		1	4	5	4	3.86
23. Prepares the patient for surgery, delivery and diagnostic laboratory test			5	6	3	4.57
24. Can insert a levine tube and institute principles of drainage	1	4	8	1		2.64

RATINGS*

1= Not Needed
2= Useful, not essential
3= Average level
4= High skill level
5= Mastery essential

TABLE 2 (Continued)

RESPONSE CATEGORIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
25. Effectively performs tracheostomy care			3	5	5	4.15
26. Can read EKG leads and effectively monitor hear rate and rhythm	2	6	6			2.44
27. Is able to apply sterile dressings			1	5	8	4.50
28. Can care for patients on the respirator	1	3	6	3	1	3.00
29. Organizes activities so that patients receive medications and treatments at correct intervals			3	5	6	4.21
30. Utilizes suggestions from other personnel to improve nursing techniques			2	8	3	3.93
31. Assumes nursing care of patients during the evening and night shifts		1	6	5	2	3.57
32. Utilizes teaching skills to explain nursing care to patients and non-professional personnel		1	7	4	1	3.38

RATINGS*

1= Not Needed
2= Useful, not essential
3= Average level
4= High skill level
5= Mastery essential

TABLE 2 (Continued)

RESPONSE CATEGORIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
33. Can assume the role of team leader		2	6	2	1	3.10
34. Teaches measures of self-care and health practice			8	5	1	3.50
35. Makes accurate recordings of patient needs and care of legal documents			3	6	5	4.14
36. Communicates clearly in speech ideas, facts, feelings, and concepts about the patient to medical and paramedical personnel			3	9	2	3.93
37. Provides the family with the opportunity for reciprocal communication			5	8	1	3.71
38. Participates in activities of professional organizations and in-service education			6	7	1	3.64

RATINGS*

1= Not Needed
2= Useful, not essential
3= Average level
4= High skill level
5= Mastery essential

Questionnaires were mailed to the twenty graduates. See Table 3 for their responses.

To develop an index number, the number of responses per answer category was multiplied by the weight assigned to each answer category listed at the top of each page of the questionnaire. All computation per question was totaled to develop a weighted score.

It can be noted that the juries felt that the thirty-eight behavioral competencies should be performed by the beginning technical nurse graduate at an average level. This was indicated by the ratings. The weighted means of the three juries ranked from 4.[illegible] to 2.44. The faculty, however, felt that it was "useful" for the graduate to "read EKG leads and effectively monitor heart rate and rhythm," but not "essential." This was displayed by a weighted mean of 2.44.

TABLE 3

RESPONSES OF TECHNICAL NURSING
ASSISTANTS TO SOCIAL-TESTING OF
BEHAVIOURAL CONFIGURATIONS

BEHAVIOUR CATEGORIES	RATINGS*					RATING (MEAN)
	1	2	3	4	5	
1. Behaviour is appropriately executed in the hospital by good grooming, speech and personal hygiene		1	4	5	2	3.417
2. Is sensitive to others evidenced by interpersonal reactions and consideration shown to patients and co-workers				6	6	4.50
3. Is committed to nursing, evidenced by dependability and reliability			1	9	2	4.00
4. Establishes goals and performs activities which recognize and support a therapeutic plan of care			2	8	2	3.92

RATINGS*

1= Not Needed
2= Useful, not essential
3= Average Level
4= High skill level
5= Mastery essential

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(g)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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(i)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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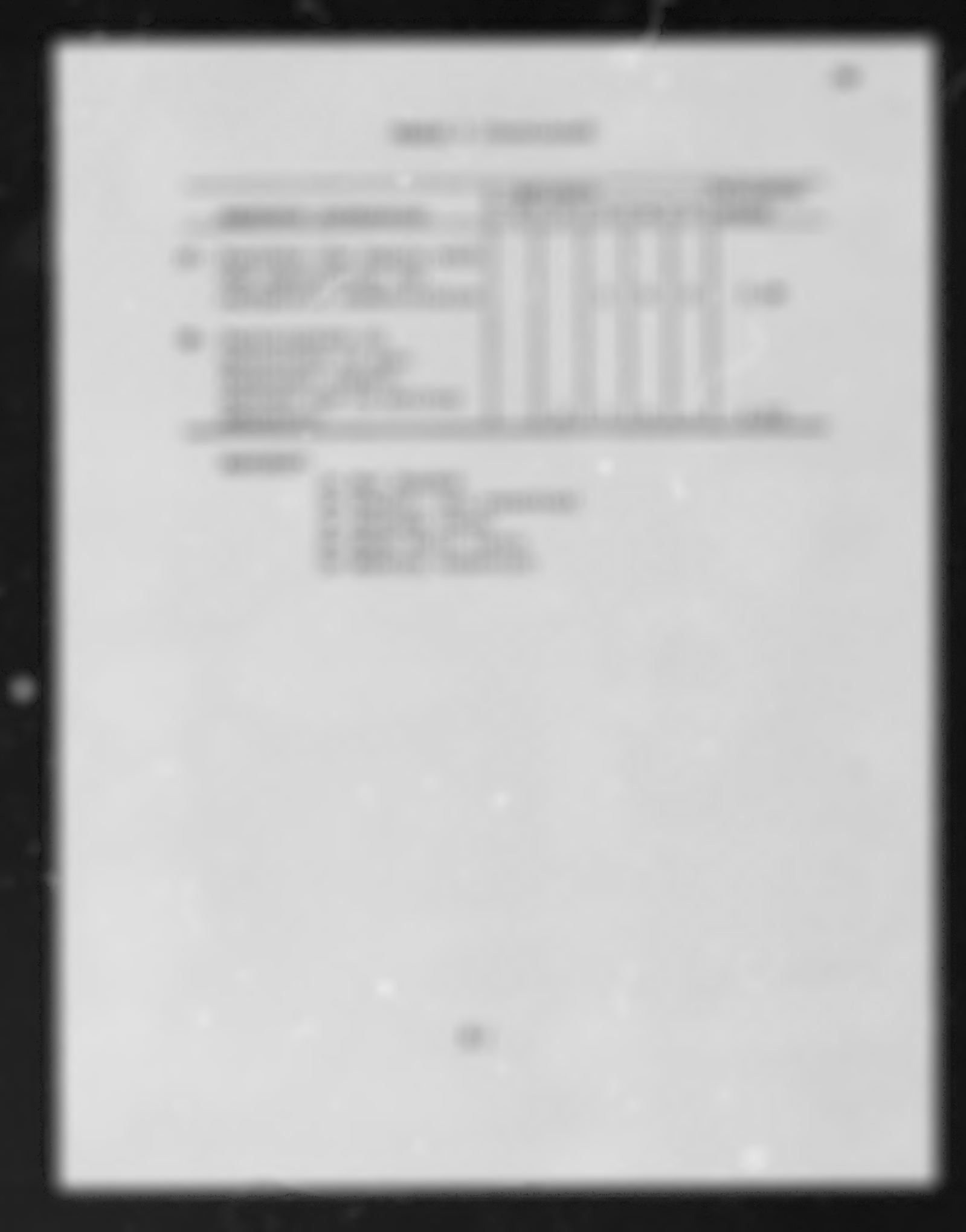

TABLE 4

COMPOSITE WEIGHTED MEAN
RANKING OF COMPETENCIES NEEDED BY
BEGINNING TECHNICAL NURSING GRADUATES
AS RATED BY SELECTED JURORS

WEIGHTED MEAN RESPONSE			BEHAVIORAL COMPETENCY
SUPERVISOR	FACULTY	GRADUATE	
3.83	4.43	4.46	Is committed to nursing evidenced by dependability and reliability
3.92	4.08	4.50	Is sensitive to others evidenced by interpersonal reactions and consideration shown to patients and co-workers
4.00	3.69	4.77	Meets emergency situations: cardiac massage, controls hemorrhage, and utilizes measures to lessen shock
3.92	4.36	4.15	Administers intramuscular and subcutaneous medications
4.00	3.93	4.23	Plans care of the patient from the standpoint of the patient as an individual person
3.75	4.00	4.38	Establishes goals and performs activities which recognize and support a therapeutic plan of care

TABLE 4 (Continued)

WEIGHTED MEAN RESPONSE			BEHAVIORAL COMPETENCY
SUPERVISOR	FACULTY	GRADUATE	
3.83	4.21	4.08	Maintains safety measures through provisions for isolation, surgical asepsis, elimination of physical hazards, and environmental control
4.08	3.86	4.08	Identifies danger signals and manifestation of illness
4.00	4.36	3.54	Administers oral and topical medications
3.83	4.21	3.85	Organizes activities so that patients receive medications and treatments at correct intervals
3.86	3.71	4.31	Recognizes signs and symptoms of major illnesses and can relate them to causes with appropriate nursing actions
3.67	4.50	3.69	Is able to apply sterile dressings
3.42	4.15	4.00	Effectively performs tracheostomy care
3.67	4.14	3.76	Makes accurate recordings of patient needs and care on legal documents
3.58	3.93	4.00	Communicates clearly in speech ideas, facts, feelings and concepts about the patient to medical and paramedical personnel

TABLE 4 (Continued)

WEIGHTED MEAN RESPONSE			
SUPERVISOR	FACULTY	GRADUATE	BEHAVIORAL COMPETENCY
3.33	4.57	3.46	Prepares the patient for surgery, delivery and diagnostic laboratory test
3.67	4.29	3.31	Can meet the physical hygienic needs of patients
3.25	3.93	4.00	Utilizes suggestions from other personnel to improve nursing techniques
3.67	3.79	3.62	Behavior is appropriately executed in the hospital by good grooming, speech and personal hygiene
3.83	2.93	4.31	Commands a body of scientific knowledge which will enable him/her to recall and apply relevant principles in the execution of patient care
3.42	3.25	4.38	Can effectively organize and manage a patient care unit with attention to the establishment of priorities in patient care
3.67	2.79	4.50	Administers intravenous medications and fluids
3.36	3.64	3.85	Adjusts approach in general conversation and in specialized explanations to the kind and type of patient

TABLE 4 (Continued)

WEIGHTED MEAN RESPONSE			BEHAVIORAL COMPETENCY
SUPERVISOR	FACULTY	GRADUATE	
3.33	3.71	3.77	Performs irrigations safely: naso-oral, colostomy, vaginal, and bladder
3.17	3.86	3.77	Can operate special equipment for patient care such as oxygen equipment and suction apparatus
3.25	4.21	3.15	Provides aid in turning, positioning and moving patients
3.33	3.57	3.69	Assumes nursing care of patients during the evening and night shifts
3.25	3.50	3.77	Teaches measures of self-care and health practice
3.50	3.86	3.15	Knows procedural skills which will enable the nurse to perform common diagnostic tests: test urine, collect sputum, feces and smears
3.25	3.18	4.00	Can assume the role of team leader
3.33	3.71	3.38	Provides the family with the opportunity for reciprocal communication
3.33	3.38	3.69	Utilizes teaching skills to explain nursing care to patients and non-professional personnel

TABLE 4 (Continued)

WEIGHTED MEAN RESPONSE			BEHAVIORAL COMPETENCY
SUPERVISOR	FACULTY	GRADUATE	
2.92	3.43	3.62	Can effectively utilize mechanical devices: circoelectric bed, traction, restraints, hoyer lift
3.00	3.64	3.23	Participates in activities of professional organizations and in-service education
3.25	3.00	3.69	Can care for patients on the respirator
2.92	3.92	2.85	Prepares patients for meals and feed patients as indicated
2.75	2.64	3.77	Can insert a levine tube and institute principles of drainage
2.75	2.44	3.54	Can read EKG leads and effectively monitor heart rate and rhythm

It can be noted that the behavioral competencies were rated at the "useful" level or above with one exception. The faculty felt that the graduates did not need to learn how to read EKG leads and effectively monitor heart rate and rhythm. The supervisors and graduates, however, felt that this experience was useful. It was decided that the thirty-eight competencies would be utilized for the survey instrument to determine the performance of the graduates at job-entry level.

Evaluating and Revising Functions 5.0

During the competency rating procedure, an opportunity to recommend additional competencies was extended to each rater. The following recommended competencies were used in the study:

Performs urinary catheterization under sterile technique

Performs irrigations to include enema

Transcribes written physician's orders and executes same.

An instrument was developed to determine the extent to which graduates of the Florida Junior College Technical

nursing program were performing the identified technical competencies. The instrument is shown in Appendix B.

The instrument listed forty-one competencies that were rated on a five point scale. In addition it provided open-ended questions for the respondents to list additional suggestions for the Florida Junior College nursing program to demonstrate the nursing graduates' performance of competencies at an acceptable level.

Eighty-nine supervisors and head nurses in the target unit were selected to complete the questionnaire. One-hundred and thirty-two graduates who completed their programs during the period of August, 1973, through April, 1974, inclusive were asked to rate their performance as beginning practitioners in nursing.

The questionnaires were mailed to each juror. After two weeks, a follow-up letter was sent to each juror thanking him for his completion of the instrument, or if he had not completed and returned the instrument, urging him to do so. See Appendix C.

A total of 51 supervisors and head nurses and 81 graduates responded to the questionnaire. This represented a return of 57% for the supervisors and head nurses, and 61% for graduates.

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The primary purpose of this study was to gain information relative to the entry-level functioning of baccalaureate nursing graduates in health care facilities. In this chapter the writer presents the data collected to determine the performance of the beginning nurse practitioners of selected behavioral competencies and a rationale for the development of a model curriculum.

The chapter is divided into three sections. It begins with an analysis of the responses of diploma nurse supervisors and head nurses to the performance of the behavioral items. The second section includes an analysis of study baccalaureate nursing graduates' responses to their performance as beginning practitioners in nursing.

The final portion of this chapter reports statements made by the two groups on the two open-ended questions of the survey instrument.

Analyses of Supervisors and Head Nurses' Responses on the Performance of Beginning Nurses

Table 3 shows the responses of diploma nurse supervisors and head nurses who are responsible for the clinical

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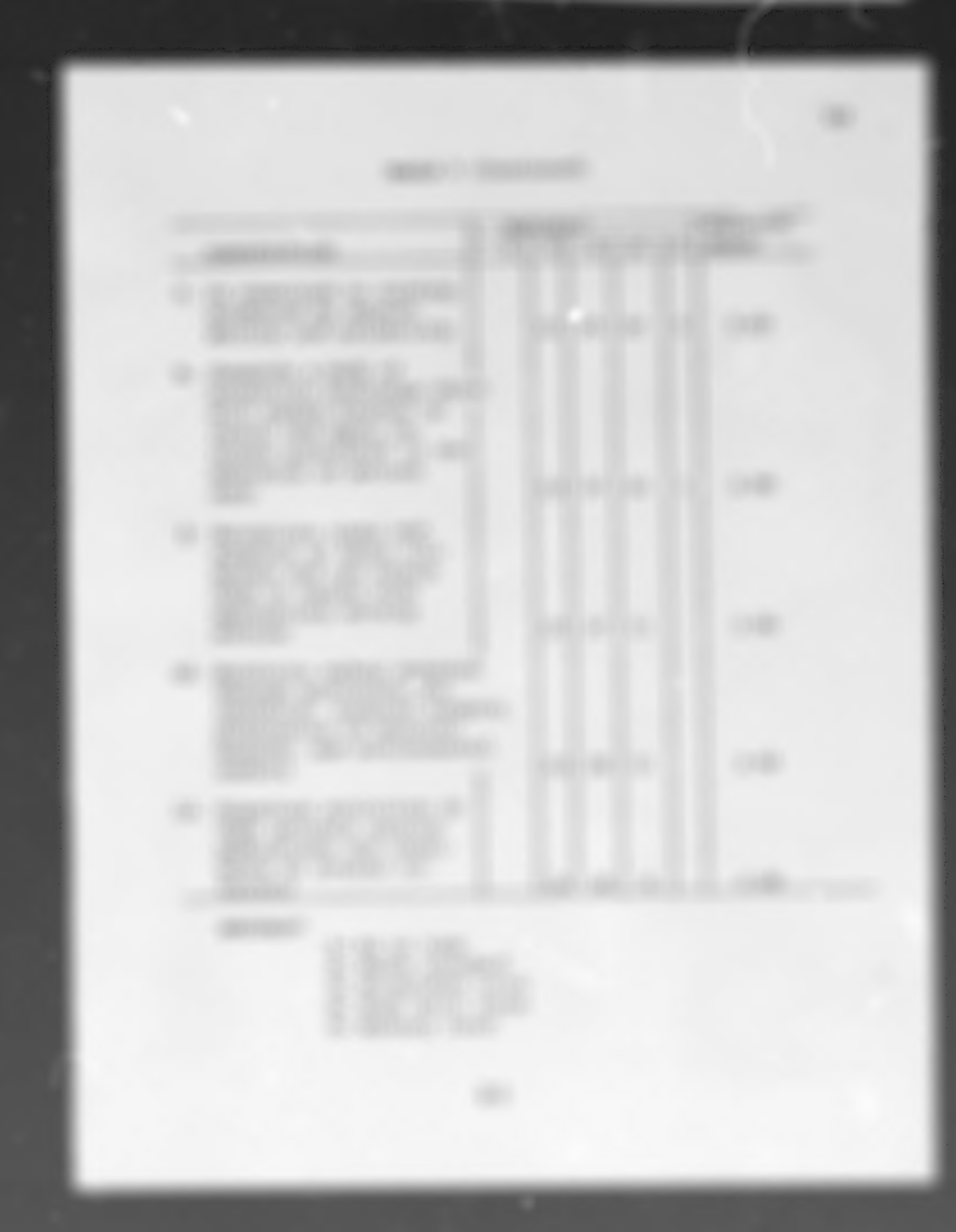

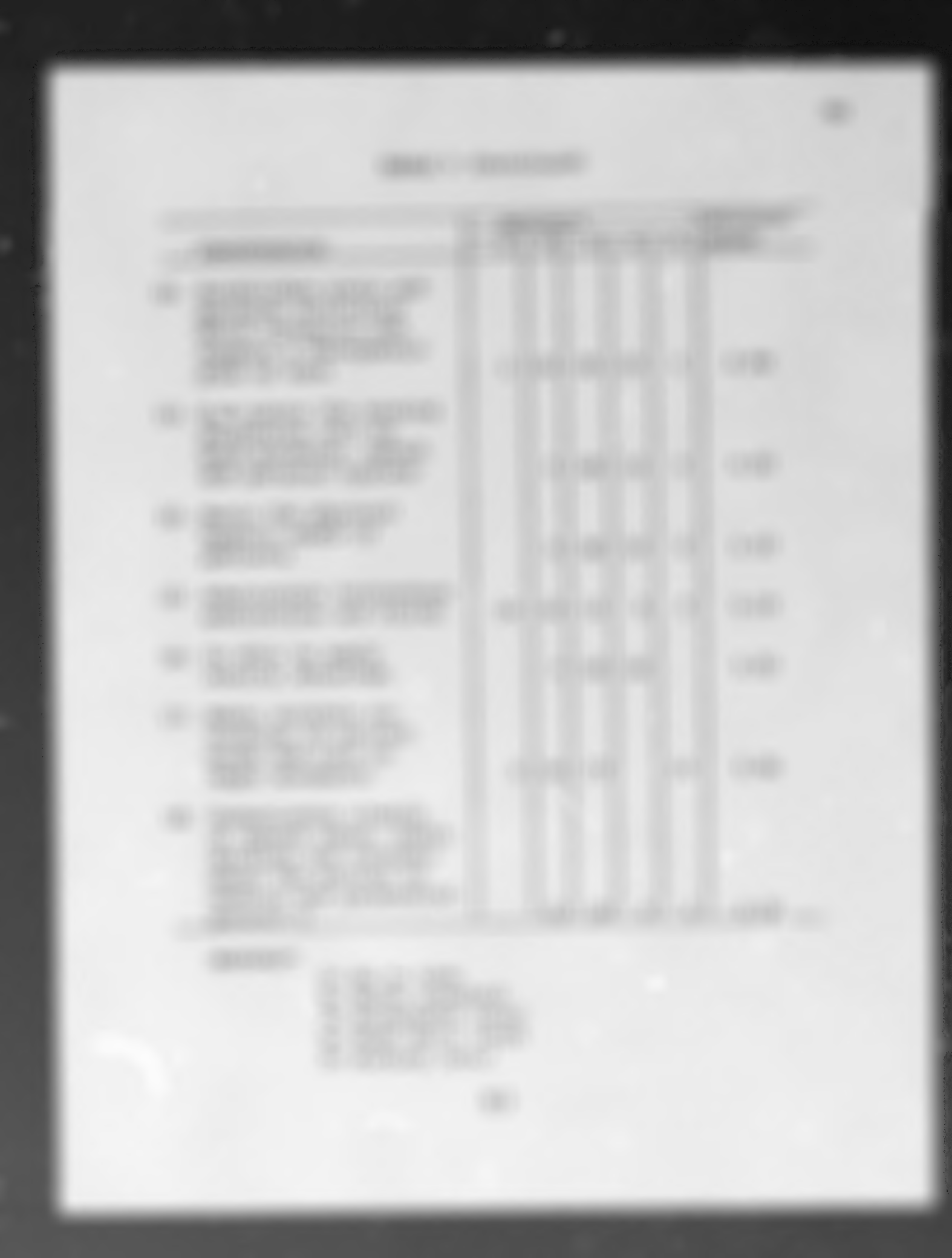

TABLE 5 (Continued)

COMPETENCIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
25. Assumes nursing care of patients during the evening and night shifts	3	13	22	8	1	2.80
26. Utilizes teaching skills to explain nursing care to patients and non-professional personnel	2	20	24	4	1	2.64
27. Provides the family with the opportunity for reciprocal communication		12	26	9	2	3.02
28. Provides aid in turning, positioning and moving patients		8	26	9	2	3.11
29. Cares for patients on the respirator		8	29	12	2	3.15
30. Utilizes suggestions from other personnel to improve nursing technique		14	14	5	1	2.35
31. Assumes the role of team leader	6	16	17	7	2	2.64
32. Teaches measures of self-care and health practice	2	12	28	8	1	2.88

RATINGS*

1= At no time
2= Below standard
3= Acceptable level
4= High skill level
5= Mastery level

TABLE 5 (Continued)

COMPETENCIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
33. Operates special equipment for patient care such as oxygen equipment and suction apparatus		10	30	8	2	3.04
34. Participates in activities of professional organizations and in-service education		13	20	8	4	3.06
35. Prepares meals and feeds patients as indicated	1	8	31	9	2	3.05
36. Utilizes mechanical devices, e.g., circoelectric bed, traction, restraints, hoyer lift	1	16	23	7	1	2.81
37. Transcribes written physicians' orders and executes same	5	8	28	8	1	2.84
38. Establishes priorities in carrying out physicians' orders		16	23	9	1	2.86
39. Inserts levine tube and institutes principles of drainage	16	12	8	4	1	2.07

RATINGS*

1= At no time
2= Below standard
3= Acceptable level
4= High skill level
5= Mastery level

TABLE 5 (Continued)

COMPETENCIES	RATINGS* 1	2	3	4	5	WEIGHTED MEANS
40. Reads EKG leads and monitors heart rate and rhythm	22	13	3	1	1	1.65
41. Performs urinary catheterization under sterile techniques	2	7	28	9	2	3.04

RATINGS*

1= At not time
2= Below standard
3= Acceptable level
4= High skill level
5= Mastery level

Analysis Of Selected Technical Nurses' Responses To The Performance Of Technical Nursing Graduates

Table 6 identifies the responses of sixty technical nursing graduates to the performance of behavioral competencies at entry-level job functioning. Again the table displays the number and weighted means of responses made on each behavioral competency on a five-point scale. A rating of three or above indicates that the graduates feel that they function from an acceptable level to mastery of the skill. The weighted means of 4.76 was the highest rating for any given competency. The graduates generally felt that they performed at mastery level the skill, "urinary catheterization with sterile technique." The item, "transcribes written physicians' orders and executes the same," received a weighted means of 4.05. However, only thirty-eight out of sixty graduates responded to the item.

The graduates generally felt that their performance of the behavioral competencies ranged from slightly high skill level to acceptable level. There were only three items rated slightly below standard. The graduates felt that they could not adequately care for patients on the

respirator, insert a levine tube and institute principles of drainage, or participate in activities of professional organizations and in-service education. Furthermore, they tended to agree that they were functioning far below standard in reading EKG leads and monitoring heart rate and rhythm. This item received a weighted means of 2.16.

TABLE 6

RESPONSES OF SIXTY TECHNICAL NURSING GRADUATES TO THE PERFORMANCE OF BEHAVIORAL COMPETENCIES AS BEGINNING PRACTITIONERS

COMPETENCIES	RATINGS*					WEIGHTED MEANS
	1	2	3	4	5	
1. Identifies danger signals and manifestation of illness		9	21	25	5	3.43
2. Plans care of the patient from the standpoint of the patient as an individual person		3	20	31	5	3.64
3. Administers oral and topical medications		1	21	19	19	3.93
4. Meets emergency situations, e.g., cardiac massage, controls hemorrhage, and utilizes measures to lessen shock	1	11	17	19	7	3.36
5. Is sensitive to others evidenced by interpersonal reactions and consideration shown to patients and co-workers		1	15	35	7	3.82
6. Administers intramuscular and subcutaneous medications	1	2	14	14	24	4.01

RATINGS*

1= At no time
2= Below standard
3= Acceptable level
4= High skill level
5= Mastery level

TABLE 4 (Continued)

STATEMENTS	RATINGS							AVERAGE RATING
	0	1	2	3	4	5	6	
7. Is committed to nursing, evidenced by dependability and reliability		1	16	23	18			4.00
8. Demonstrate a body of scientific knowledge which will enable him/her to recall and apply relevant principles in the execution of patient care		9	27	22	1			3.05
9. Recognizes signs and symptoms of major illnesses and can relate them to cases with appropriate nursing actions		7	29	24	6			3.36
10. Maintains safety measures through practicals for isolation, surgical asepsis, elimination of physical hazards, and environmental control		3	25	30	9			3.58
11. Organizes activities so that patients receive medications and treatments at correct intervals		1	23	33	13			3.70

RATINGS*

0= At no time
1= Below standard
2= Acceptable level
4= High skill level
5= Mastery level

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Schedule C (Form 1120-W)

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TABLE 7 (Continued)

WEIGHTED MEAN RESPONSE			
TOTAL	SUPERVISOR	GRADUATE	BEHAVIORAL COMPETENCY
6.87	3.11	3.76	Provides aid in turning, positioning and moving patients
6.80	2.86	3.94	Establishes priorities in carrying out physicians' orders
6.71	3.08	3.63	Adjusts approach in general conversation and in specialized explanations to the kind and type of patient
6.71	3.07	3.64	Plans care of the patient from the standpoint of the patient as an individual person
6.69	3.03	3.66	Knows procedural skills which will enable the nurse to perform common diagnostic tests: test urine, collect sputum, feces and smears
6.65	2.96	3.69	Makes accurate recordings of patient needs and care on legal documents
6.65	2.88	3.77	Organizes activities so that patients receive medications and treatments at correct intervals
6.61	3.04	3.57	Operates special equipment for patient care such as oxygen equipment and suction apparatus

TABLE 7 (Continued)

WEIGHTED MEAN RESPONSE			
TOTAL	SUPERVISOR	GRADUATE	BEHAVIORAL COMPETENCY
6.57	3.02	3.55	Prepares the patient for surgery, delivery and diagnostic laboratory test
6.54	2.96	3.58	Maintains safety measures through provisions for isolation, surgical asepsis, elimination of physical hazards, and environmental control
6.51	3.02	3.49	Provides the family with the opportunity for reciprocal communication
6.39	2.84	3.55	Establishes goals and performs activities which recognize and support a therapeutic plan of care
6.38	2.80	3.58	Assumes nursing care of patients during the evening and night shifts
6.32	2.96	3.36	Recognizes signs and symptoms of major illnesses and can relate them to causes with appropriate nursing actions
6.31	2.88	3.43	Identifies danger signals and manifestation of illness
6.31	2.76	3.55	Communicates clearly in speech ideas, facts, feelings and concepts about the patient to medical and paramedical personnel

TABLE 7 (Continued)

WEIGHTED MEAN RESPONSE			BEHAVIORAL COMPETENCY
TOTAL	SUPERVISOR	GRADUATE	
6.25	2.92	3.33	Performs irrigations safely, e.g., naso-oral, enema, colostomy, vaginal and bladder
6.23	2.98	3.25	Commands a body of scientific knowledge which will enable him/her to recall and apply relevant principles in the execution of patient care
6.21	2.88	3.33	Teaches measures of self-care and health practice
6.21	2.64	3.67	Assumes the role of team leader
6.17	2.59	3.58	Performs tracheostomy care
6.16	2.64	3.52	Utilizes teaching skills to explain nursing care to patients and non-professional personnel
6.14	2.52	3.62	Organizes and manages patient care unit with attention to the establishment of priorities in patient care
6.00	2.35	3.65	Utilizes suggestions from other personnel to improve nursing technique
5.98	3.05	2.93	Prepares meals and feeds patients as indicated

TABLE 7 (Continued)

WEIGHTED MEAN RESPONSE			
TOTAL	SUPERVISOR	GRADUATE	PROFESSIONAL COMPETENCY
5.94	2.58	3.36	Meets emergency situations, e.g., cardiac massage, controls hemorrhage, and utilizes measures to lessen shock
5.91	2.61	3.10	Utilizes mechanical devices, e.g., circoelectric bed, traction, restraints, hoyer lift
5.87	3.15	2.72	Cares for patients on the respirator
5.56	3.14	3.42	Administers intravenous medications and fluids
5.55	3.06	2.49	Participates in activities of professional organizations and in-service education
4.87	2.07	2.80	Inserts a levine tube and institutes principles of drainage
3.81	1.65	2.16	Reads EKG leads and monitors heart rate and rhythm

By inspection of the composite weighted means, it could be readily observed that the supervisors and head nurses differed greatly with the graduates. To determine the extent of this difference, Table 6 reports the weighted means, standard deviation and t ratio for each behavioral competency as rated by supervisors and head nurses and by graduates. Of the 41 competencies, the two rating groups differed significantly on 35 competencies at the .01 level. This does indicate a perception problem which would encourage curriculum revision involving supervisors, head nurses, graduates, students and faculty.

When a coefficient of correlation of the supervisors and head nurses' ratings and the graduates' ratings of the competencies was computed, it was found to be 0.35 which indicated an insignificant positive agreement between the ratings of the two juries. See Appendix D for computation.

Table 6

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3	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
4	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
5	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
6	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
7	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
8	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
9	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
10	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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15	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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Anhang 4 (Fortsetzung)

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The responses of the technical nurse graduates were paraphrased as indicated below:

Entrance examinations should be given to all prospective students. (3)

More practical experience should be required. (27)

More problem-solving should be included in the students' experience. (2)

Better supervision and instructions from head nurses and in-service for the new graduate. (3)

Include intravenous therapy in the curriculum. (3)

There should be more communication concerning evaluation of the graduates. (2)

Provide more class interaction and lectures. (10)

Send more surveys to the employer or direct supervisor. (2)

Stress the importance of interpersonal relationships. (5)

Provide a separate course in nutrition. (2)

Psychiatry should be among the first courses offered in nursing. (4)

Provide a separate course in pharmacology. (2)

Provide more clinical care experiences for students. (5)

Require that all other courses be complete prior to the beginning nursing courses. (5)

CHAPTER V

PROPOSED MODEL CURRICULUM

Introduction

In order that the community health needs are adequately met, nurses must be prepared at varying job functioning levels and then permitted to perform in differentiated ways. To perform certain behavioral competencies essential in meeting the nursing needs of patients in a health care delivery system, the technical nurse will of necessity require adequate preparation and proper utilization in health care facilities.

The present study was undertaken to determine whether the graduate of the associate degree program at Florida Junior College at Jacksonville were performing competencies at an acceptable level as beginning practitioners. It was felt that if the performance of the graduates was thoroughly assessed and the results revealed that a discrepancy exists between their performance of the behavioral competencies and the perception of the supervisors and head nurses, this would serve as a basis for the revision of the curriculum.

The findings revealed that there was a significant different in the rating of the performance of the graduates by the two juries.

The model curriculum which follows is an attempt to incorporate certain behavioral competencies essential for the performance of the technical nurse into the program offerings.

The Model Curriculum

The Associate in Science Degree Program in Technical Nursing is four terms in length. The student who satisfactorily completes all of the requirements with a minimum grade point average of 2.00 is eligible to write the examination for state licensure as a registered nurse.

Philosophy. The faculty of the Associate in Science Degree Nursing Program of the Florida Junior College at Jacksonville believes that the philosophy and purposes of the Technical Nursing Program are in accord with the philosophy and purposes of the college.

We belive that education is a continuous process involving the lifetime of an individual in which learning produces behavioral changes. Learning is an active process which involves the cognitive, psychomotor and affective domains of the learner and which can be demonstrated by observation of changes in the behavior of individuals. Learning takes place within the structural and functional

limits that characterize the individual. Learning is a gradual process which takes place through practice and through selected experiences that enable the learner to identify concepts and verify principles. Progress is enhanced by moving from the known to the unknown and through reinforcement of desired behaviors.

> Nursing practice is the engaging in of a direct service, nursing care, in response to health needs of an individual, a family or community. The nature of the service is generated by a societal need and is characterized by accountability to the client. The unique function of the nurse is to assist the individual, sick or well, in the performance of those activities contributing to health or its recovery (or to peaceful death) that he would perform unaided if he had the necessary strength, will or knowledge. And to do this in such a way as to help him gain independence as rapidly as possible.

Technical nursing practice is carrying out nursing measures as well as medically delegated techniques with a high degree of skill using principles from an ever-expanding body of knowledge. The technical nurse practitioner deals with common, recurring nursing problems and standardized nursing actions, applying patterns of intervention in patient care which yield predictable results. The technical nurse utilizes the problem solving process in identifying patients' emotional and physical needs and in planning and implementing

appropriate nursing care. Through these functions the technical nurse shares in the responsibilities of the total health team.

We believe that the curriculum should be so designed as to afford balance between general education and technical nursing education. In order to gain understanding of and an appreciation for people who are undergoing stressful experiences in their lives and in order to gain knowledge of the scientific basis for nursing practice, it is necessary that the curriculum of the technical nursing program include courses in nursing, communication, the humanities, and the physical, biological and social sciences.

Associate degree nursing students at Florida Junior College are from various age groups and have diverse backgrounds. Recognizing this and the fact that learning is a personal process, the faculty believes in a flexible, individualized approach to learning that fosters active participation and self discipline and gives consideration to the life experiences of the student that are pertinent to technical nursing.

Through interaction in the learning environments, the student should be free to explore and apply the nursing

process and to receive the guidance, direction, feedback and reinforcement necessary for personal and professional growth.

As a new graduate this person can function at the level of a team member under the guidance and direction of experienced registered nurses. Over a period of time, during which the new graduate has opportunities for practice, competence in skills will be enhanced to the point at which further responsibilities may be assumed, such as directing and supervising the practice of other health workers in the nursing care given to a group of patients.

End of Program Objectives - The program of technical nursing is designed to meet the needs of students who demonstrate the ability to achieve a level of technical competence and to provide an educational background for continued intellectual growth. The faculty recognizes the potential of each individual student and encourages those who are qualified to continue professional growth.

A student who successfully completes the technical nursing program will demonstrate the following competencies at an acceptable level of performance:

[illegible] the nursing process to provide nursing care for patients with commonly occurring problems based on scientific principles

Exercise creative thinking in organizing, implementing and evaluating nursing care for patients of all ages

Demonstrate the use of communicative skills in inter-personal relationship with patients, families and members of the health team

Identify and discriminate between problems in established principles in meeting the needs of patients

Demonstrate skill in observing, reporting and recording patient needs and care on legal documents

Initiate referrals with other health agencies in the prevention of illness and the promotion and maintenance of health

Demonstrate an understanding of self-supervision by seeking guidance and/or supervision as indicated and showing a basis for continuing personal and professional growth

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[illegible]

Term I

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Term II

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Identify selected principles of growth and development and their relationship to behavioral patterns and fundamental needs of children

List the basic patterns of child rearing in our culture

Describe the services and functions of selected major health agencies contributing to the health of the child in the local community

NURSING III. To successfully meet the health needs of individuals, the nurse must be able to understand and apply scientific principles in nursing care, utilize technical skills effectively, and clearly communicate with a variety of patients.

The purpose of this course is to expose the student to certain unified concepts basic to nursing practice which will enable him/her to assist patients as human beings in their struggle to adapt to lifes problems and to maintain psychophysiological balances.

End of Course Objectives. Upon completion of this course the student will demonstrate the following competencies at an acceptable level of performance:

Apply principles of physical, biological and social sciences in providing patient care

Teach selected patients normal health concepts with recognition of self limitations

Acquire knowledge and understanding of the principles and the care of patients of all ages

Demonstrate the use of the nursing process in solving nursing care problems

Establish purposeful relationships with others as a member of the health team

Increase task-skills in nursing through the utilization of appropriate procedural techniques in patient care

Assume responsibility for self-growth by attempting to cite personal strengths and weaknesses

NURSING IV. This course allows the student the opportunity to explore the needs of patients with psychogenic disorders. Emphasis is placed on the importance of the nurse in providing an atmosphere conducive to the restoration and maintenance of homeostasis. Learning experiences are designed to permit the students the occasion to demonstrate their understanding of the role of the nurse in community health agencies in providing for preventive, in-patient, out-patient, emergency, consultation and educational services for persons with problems of a psychogenic or functional origin.

End of Course Objectives. Upon completion of the course, the student will be able to demonstrate the following competencies at an acceptable level of performance:

Appraise the changing role of psychiatry as it relates to the increasing responsibility of the nurse in the mental health field

Utilize skills which encourage appropriate communication and interpersonal conduct

Recognize the psychotrophic drugs, their action, usual dosage and side effects

Describe the relationship of anxiety to the use of defense mechanisms

Describe observable behavior presented by the patient using acceptable terminology

Recognize symptoms of deviant behavior in the child and adult patient

Differentiate between neurological and psychological diagnostic examinations

Contrast organic behavior disturbances with functional disorders

Identify the involvement of social agencies in a community mental health program and the services they provide

NURSING V. Disease or structural alterations may hinder essential cellular activity and ultimately affect the survival of the organism.

The student in this course will study and observe common clinical manifestations in varying disturbances. The course focuses on the interrelatedness of illnesses that have been incorporated by the utilization of oxygen deprivation as a core. This concept makes it possible to include

specific nursing problems of a medical and surgical nature in the care of the adult and child patient. Conditions common to various age groups are considered with emphasis on commonalities of nursing problems and interventions.

End of Course Objectives. Upon completion of Nursing V, the student will demonstrate the following competencies at an acceptable level of performance:

Utilize the nursing process in planning and implementing nursing care in given clinical patient assignments

Demonstrate his/her ability to use appropriate therapeutic communication skills

Understand the usage, action, route of administration, side effects and nursing implications of drugs commonly used in major health problems of all age groups

Perform basic related technical skills essential to the effective nursing care of the adult and child patient with commonly occurring health problems

Identify and demonstrate appropriate steps in meeting selected patients' needs in emergency nursing care

Recognize the need for dietary modifications in order that the essentials of nutrition may be met

Establish priorities and use mature judgement in assessing, planning, intervening and evaluating patient care

NURSING SEMINAR. The purpose of this course is to provide technical nursing students the opportunity to increase their knowledge and understanding of the nursing profession and current issues affecting the practice of nursing in preparation for making the transition from student to graduate.

The student will be expected to write personal objectives and describe plans for implementation with the approval of the instructor.

SUMMARY

The model curriculum was constructed with the intent of identifying behavioral objectives and providing appropriate course content based on the ratings and descriptive analysis of the juries.

Research of the literature revealed the need for a conceptual framework to guide the nursing curriculum and provide a rationale for content and sequence of nursing courses. The existing technical nursing curriculum does not present such a framework. The writer identified a conceptual framework in this major research project.

Ratings and comments suggested the need for a separate course in nutrition to increase the graduates' understanding

and ability to prepare patients for diet modifications. A new course in nutrition was entered in the model curriculum design.

The clinical laboratory experiences were lengthened in the plan to allow for increased performance and competency of technical skills essential in meeting the nursing needs of patients.

CHAPTER VI

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

SUMMARY

The purpose of this study was threefold: To identify the entry-level technical nursing competencies; To determine the extent to which the graduates of the technical nursing program at Florida Junior College are performing these functions; and to establish a model curriculum for the associate degree technical nursing program at Florida Junior College at Jacksonville.

Having ascertained from previous studies that nearly to ninety-five per cent of the graduates each [illegible] in this area, the study was limited to entry-level performance of technical nurses in local hospitals.

The instrument design for identifying the competencies of technical nurses was the result of a thorough review of the job analysis, investigation of personnel functions and a studious review of the literature identifying the performance and practice of the technical nurse. The behavioral competencies were validated by faculty, supervisors, head nurses and technical nursing graduates.

[illegible] [illegible] [illegible] [

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(a) [redacted]

(b) [redacted]

(c) [redacted]

(d) [redacted]

(e) [redacted]

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(b) [illegible]

(c) [illegible]

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(e) [illegible]

(f) [illegible]

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APPENDICES

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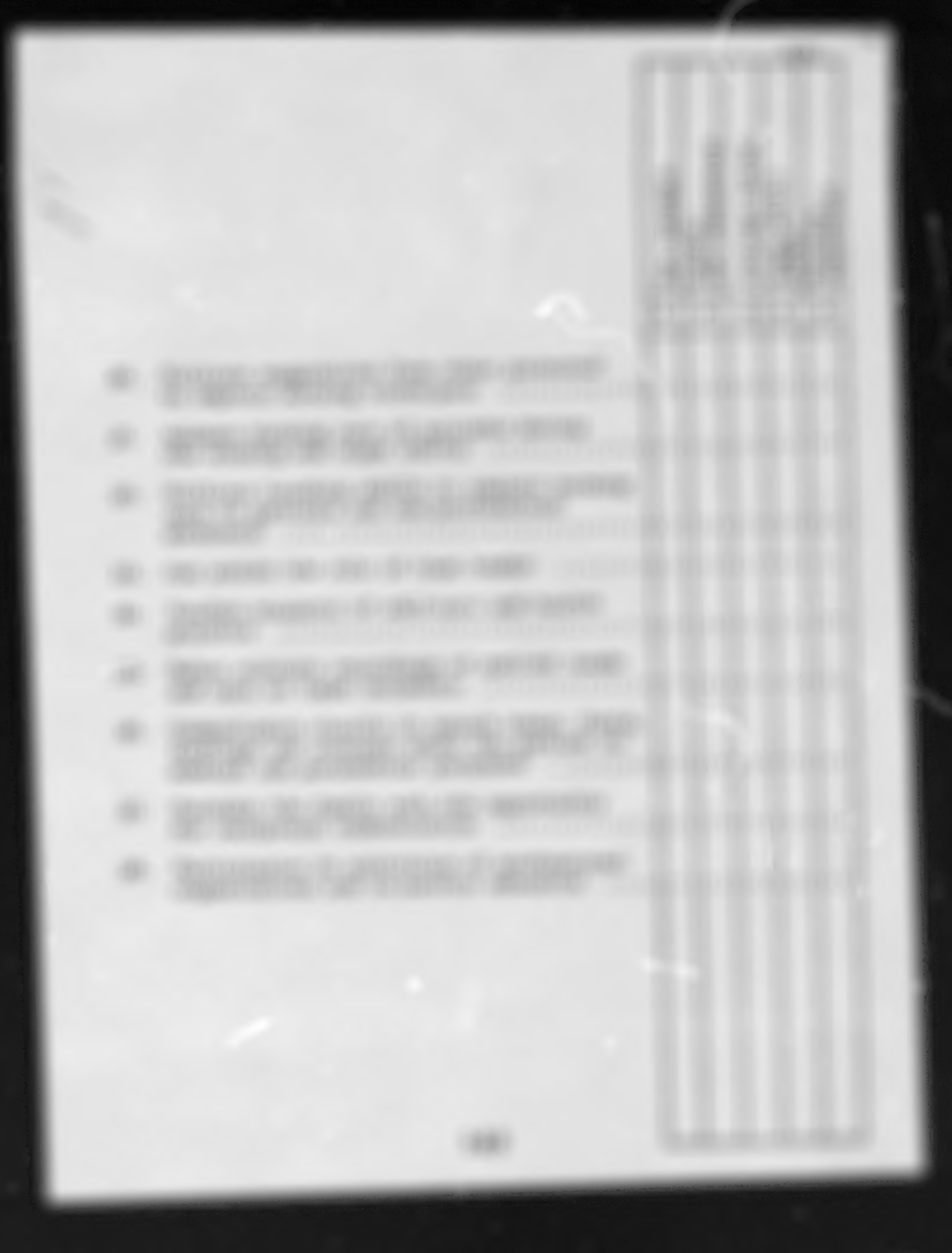

FLORIDA JUNIOR COLLEGE AT JACKSONVILLE
NORTH CAMPUS
4501 CAPPER ROAD
JACKSONVILLE, FLORIDA 32218

November 27, 1974

Dear

As a supervisor of graduates of the Florida Junior College technical nursing program, your opinion of the entry-level functions of the graduates would greatly enhance the revision of the nursing program of study and any necessary improvement in course content.

The competencies listed on the enclosed survey form have been identified as necessary in order for the technical nursing graduate to function effectively in health care facilities. It would be most appreciated if you would please complete the survey and return it as soon as possible in the enclosed postage-paid, self addressed envelope.

Thank you in advance for sharing your opinion respecting the level of performance that Florida Junior College technical nursing graduates demonstrate in the competencies listed on the enclosed form.

Sincerely,

(Mrs.) Lois D. Gibson
Technical Nursing Instructor

Enclosures (2)

FLORIDA JUNIOR COLLEGE AT JACKSONVILLE
NORTH CAMPUS
4501 CAPPER ROAD
JACKSONVILLE, FLORIDA 32218

Dear

As a recent graduate of the Florida Junior College technical nursing program, your opinion of the performance competency expectations of the beginning practitioner in nursing would greatly enhance the revision of the curriculum and any necessary improvement in course content.

The competencies listed on the enclosed survey form have been identified as necessary in order for the technical nursing graduate to function effectively in health care facilities. It would be most appreciated if you would please complete the survey and return it as soon as possible in the enclosed postage-paid, self-addressed envelope.

Thank you in advance for sharing your opinion of your performance level as a beginning nurse practitioner and a Florida Junior College technical nursing program graduate.

Sincerely,

(Mrs.) Lois D. Gibson
Technical Nursing Instructor

Enclosures (2)

SURVEY OF TECHNICAL NURSE ENTRY-LEVEL COMPETENCIES

INTRODUCTION: The purpose of this survey is to determine the extent to which graduates of the Florida Junior College technical nursing program are performing technical competencies.

DIRECTIONS: Place an (X) in the column corresponding to your opinion regarding the level of competency at which you performed during the first year of your work experience as a graduate. It is not necessary to indicate your name on this form.

The column rating scale per competency is as follows:

at a mastery level 5
at a rather high skill level..... 4
at an acceptable level 3
at a level below standard 2
at no time 1

	At no time	Below standard	Acceptable level	High skill level	Mastery level
	1	2	3	4	5
1. Identifies danger signals and manifestation of illness.					
2. Plans care of the patient from the standpoint of the patient as an individual person.					

	At no time	Below standard	Acceptable level	High skill level	Mastery level
	1	2	3	4	5
3. Administers oral and topical medications.					
4. Meets emergency situations, e.g., cardiac massage, control hemorrhage, and utilizes measures to lessen shock.					
5. Is sensitive to others evidenced by interpersonal reactions and consideration shown to patients and co-workers.					
6. Administers intramuscular and subcutaneous medications.					
7. Is committed to nursing, evidenced by dependability and reliability.					
8. Commands a body of scientific knowledge which will enable him/her to recall and apply relevant principles in the execution of patient care.					
9. Recognizes signs and symptoms of major illnesses and can relate them to causes with appropriate nursing actions.					
10. Maintains safety measures through provisions for isolation, surgical asepsis, elimination of physical hazards, and environmental control.					

	At no time	Below standard	Acceptable level	High skill level	Mastery level
	1	2	3	4	5
11. Organizes activities so that patients receive medications and treatments at correct intervals.					
12. Establishes goals and performs activities which recognize and support a therapeutic plan of care.					
13. Represents the nursing profession well by good grooming, speech and personal hygiene.					
14. Meets the physical hygenic needs of patients					
15. Administers intravenous medications and fluids.					
16. Is able to apply sterile dressings.					
17. Makes accurate recordings of patient needs and care on legal documents.					
18. Communicates clearly in speech ideas, facts, feelings and concepts about the patient to medical and paramedical personnel.					
19. Knows procedural skills which will enable the nurse to perform common diagnostic tests: test urine, collect sputum, feces and smears.					
20. Organizes and manages patient care unit with attention to the establishment of priorities in patient care.					
21. Performs tracheostomy care.					

	At no time	Below standard	Acceptable level	High skill level	Mastery level
	1	2	3	4	5
22. Adjusts approach in general conversation and in specialized explanations to the kind and type of patient.					
23. Performs irrigations safely, e.g., naso-oral, enema, colostomy, vaginal and bladder.					
24. Prepares the patient for surgery, delivery and diagnostic laboratory test.					
25. Assumes nursing care of patients during the evening and night shifts.					
26. Utilizes teaching skills to explain nursing care to patients and non-professional personnel.					
27. Provides the family with the opportunity for reciprocal communication.					
28. Provides aid in turning, positioning and moving patients.					
29. Cares for patients on the respirator.					
30. Utilizes suggestions from other personnel to improve nursing technique.					
31. Assumes the role of team leader.					
32. Teaches measures of self-care and health practice.					

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

33. Operates special equipment for patient care such as oxygen equipment and suction apparatus.
34. Participates in activities of professional organizations and in-service education.
35. Utilizes mechanical devices, e.g., electrotherapy bed, traction, ventilator, hoyer lift.
37. Prescribes within physicians' orders and executes same.
38. Establishes priorities in carrying out physicians' orders.
39. Inserts a levine tube and maintains principles of drainage.
40. Reads EKG leads and monitors heart rate and rhythm.
41. Performs urinary catheterization under sterile technique.

[illegible]

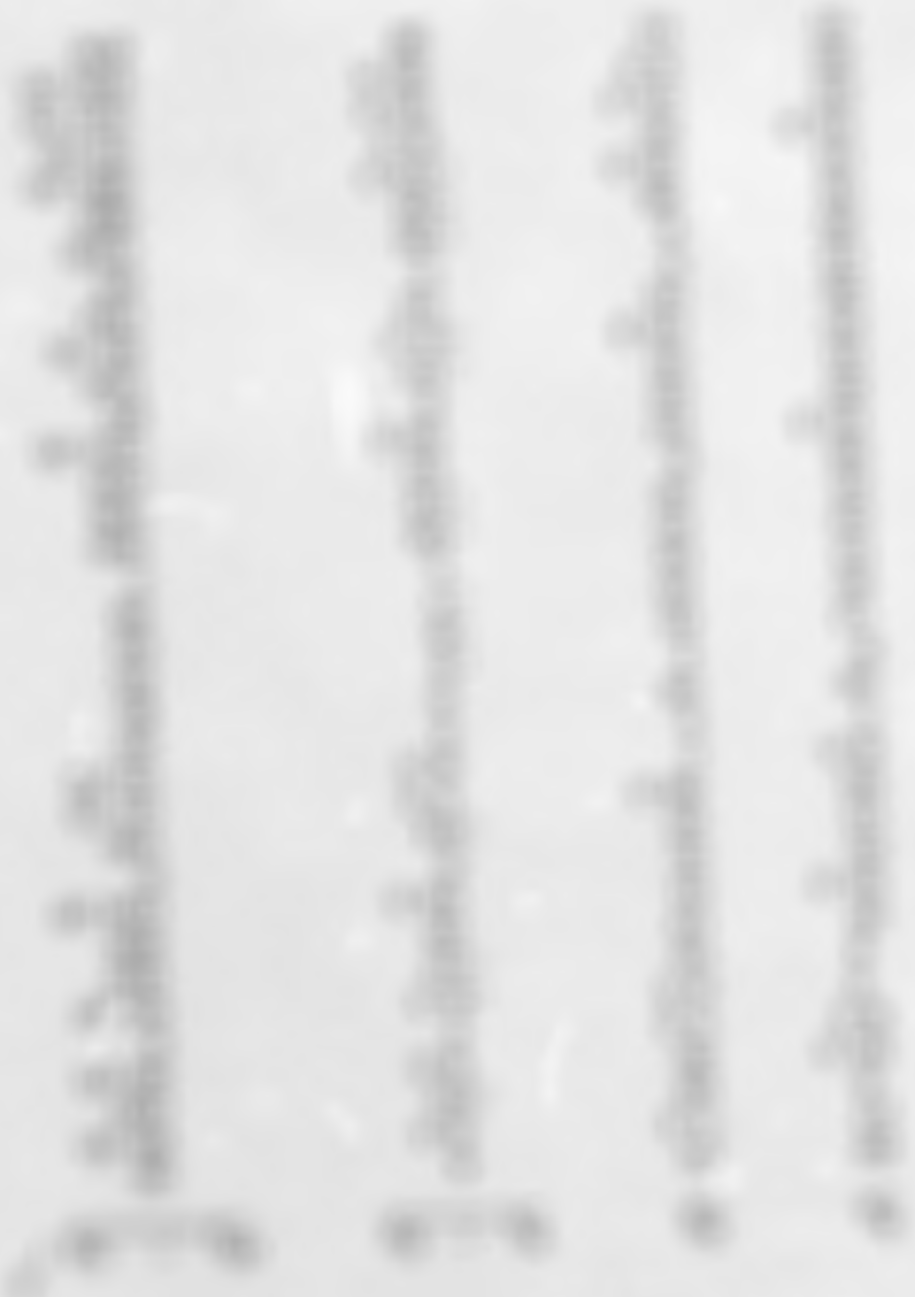
[illegible]

[illegible]

[illegible]

a. [illegible]

b. [illegible]



Honors	Sigma Theta Tau Honor Sorority Boston University Boston, Massachusetts
Professional Positions	Operating Room Nursing Duval Medical Center Jacksonville, Florida, 1949-1953
	Charge Nurse, Private Hall John A. Andrew Hospital Tuskegee Institute, Alabama 1953-1955
	Staff Nurse Duval Medical Center Jacksonville, Florida, 1955-1957
	Instructor, Medical-Surgical Nursing Brewster Duval School of Nursing Jacksonville, Florida, 1957-1962
	Instructor, Practical Nursing Stanton Vocational High School Jacksonville, Florida, 1963-1968
	Instructor-Coordinator of Medical-Surgical Nursing Florida Junior College Jacksonville, Florida, 1968-1975

SIGNATURE PAGE

I certify that I have read and am willing to sponsor this Major Applied Research Project. In my opinion it conforms to acceptable standards and is fully adequate in scope and quality, as a Major Applied Research Project for the degree of Doctor of Education at Nova University.

B R Herrscher

1 Dr. Barton R. Herrscher
MRP Advisor

I certify that I have read this Major Applied Research Project and in my opinion it conforms to acceptable standards for Major Applied Research Projects for the degree of Doctor of Education at Nova University.

Philip J. Gearing

2 Dr. Philip J. Gearing
Cluster Coordinator

This Major Applied Research Project was submitted to the Central Staff of the Nova University Ed.D. Program for Community College Faculty and is acceptable as partial fulfillment of the requirements for the degree of Doctor of Education.

John A. Scigliano

3 Dr. John A. Scigliano
Nova University Central Staff Member

UNIVERSITY OF CALIF.
LOS ANGELES

MAY 21 1976

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